SCANNED MAY 0 6 2022

(Rev January 2020) Department of the Treasury

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

▶ Do not enter social security numbers on this form as it may be made public.

Interr	al Reve	nue Service Go to www.irs.gov/Form990 for instructions	and the late	est information.`//	Inspection
A F	or th	e 2019 calendar year, or tax year beginning JUL 1, 2019	and ending	JUN 30, 2020♥	
B	heck if	C Name of organization		D Employer identif	cation number
	_Addre	SS OCLC, INC.			
]Name	Doing business as		31-0734115	
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/su	ite E Telephone numbe	<u> </u>
	Final	CECE VILCOUR DIACE		614-764-6000	
	termin			G Gross receipts \$	302,567,800.
	Amen	DUBLIN OH 43017			
\vdash	_return Apple			H(a) Is this a group r	
	⊥tion pendi	SAME AS C ABOVE	Rh	for subordinates H(b) Are all subordinates i	
1 7	ax-ex	empt status X 501(c)(3) 501(c) () ((Insert no.) 4947(a))(1) or 📜 🏂	If "No," attach a	list (see instructions)
JV	Vebsi	e: WWW.OCLC.ORG		H(c) Group exemption	n number
K F	orm o	organization. X Corporation	L Ye	ear of formation, 1967	A State of legal domicile; OH
_	rt I	Summary	1	•	
_	1	Briefly describe the organization's mission or most significant activities ESTA	ABLISH MA	INTAIN AND OPERATE	
ဦ	,	A COMPUTERIZED LIBRARY NETWORK AND TO (CONTINUED ON SCHEDU			
Governance	2	Check this box I if the organization discontinued its operations of dis		ore than 25% of its net a	ecate
Ver			RECI	4.0	14
ဠ		Number of voting members of the governing body (Part VI, line 1a)		EIVED 3	14
ಂಶ		Number of independent voting members of the governing body (Part VI, pe	1D)	10 4	989
Activities &		Total number of individuals employed in calendar year 2019 (Part V, line	JUL 1	2 2021 8	
<u> </u>	6	Total number of volunteers (estimate if necessary)		2 2021 S 6	0
Aci	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	OCDE	<u>ra</u>	82,496.
	b	Net unrelated business taxable income from Form 990-T, line 39	OGDE	NUT 76	58,300.
				Prior-Year	Current Year
<u>o</u>	8	Contributions and grants (Part VIII, line 1h)	L	755,551.	2,368,236.
Z.	9	Program service revenue (Part VIII, line 2g)	Ĺ	220,142,270.	210,825,634.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		15,083,458.	<816,605.>
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	Г	13,217.	<210,806.>
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 1	2)	235,994,496.	212,166,459.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		96,154.	46,009.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
'n		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-1	10) F	129,252,651.	135,481,052.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	·°′,	0.	0.
Эеп		- '	٥. ١		<u> </u>
Ĕ		Total fundraising expenses (Part IX, column (D), line 25)		97,768,651.	76,403,252.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		227,117,456.	211,930,313.
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	-		236,146.
	19	Revenue less expenses Subtract line 18 from line 12	+	8,877,040.	
SOI			⊢	Beginning of Current Year	End of Year
Net Assets or Fund Balances		Total assets (Part X, line 16)	- ⊦	434,645,398.	453,382,737.
ag ³		Total liabilities (Part X, line 26)	-	169,032,431.	189,241,202.
		Net assets or fund balances Subtract line 21 from line 20		265,612,967.	264,141,535.
	rt II	Signature Block			
		lties of perjury, I declare that I have examined this return, including accompanying sched			y knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information o	of which prepa	rer has any knowledge.	
		- \ R.	an ah	2021 May 20)
Sigr)	Signature of officer willim) Res	80	Date	
Her	Э	WILLIAM ROZEK, TREASURER & CFO			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid		JACOB COOK	he the	5/7/2021 If self employ	P01240455
Prep		Firm's name BDO USA, LLP		Firm's EIN	
Use			- ,	I HIM 5 LIN	
USE	Jiiiy			Dhono no 616	~774~7000
_		COLUMBUS, OH 43215		Phone no.616	
May	the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

	990 (2019) OCLC, INC.	31-073411	⁵ Pa
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission		
	ESTABLISH, MAINTAIN AND OPERATE A COMPUTERIZED LIBRARY NETWORK AND TO		
	PROMOTE THE EVOLUTION OF LIBRARY USE, OF LIBRARIES THEMSELVES AND OF		
Pa	LIBRARIANSHIP, AND TO PROVIDE PROCESSES AND PRODUCTS FOR THE BENEFIT		
	OF LIBRARY USERS AND LIBRARIES, INCLUDING SUCH OBJECTIVES AS		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?		Yes X
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	s?	Yes X
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services,	-	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to o	thers, the total e	xpenses, and
	revenue, if any, for each program service reported		
4a	(Code) (Expenses \$185,843,526. including grants of \$46,009.) (Re	venue \$	210,825,6
	OCTC		
	OCLC IS A NONPROFIT GLOBAL LIBRARY COOPERATIVE THAT PROVIDES SHARED	<u> </u>	
	TECHNOLOGY SERVICES, ORIGINAL RESEARCH AND COMMUNITY PROGRAMS SO THAT		
	LIBRARIES CAN BETTER FUEL LEARNING, RESEARCH AND INNOVATION, THROUGH		
	OCLC, MEMBER LIBRARIES COOPERATIVELY PRODUCE AND MAINTAIN WORLDCAT, THE		
	MOST COMPREHENSIVE GLOBAL NETWORK OF DATA ABOUT LIBRARY COLLECTIONS AND		
	SERVICES. LIBRARIES GAIN EFFICIENCIES THROUGH OCLC'S WORLDSHARE, A		
	COMPLETE SET OF LIBRARY MANAGEMENT APPLICATIONS AND SERVICES BUILT ON		
	AN OPEN, CLOUD-BASED PLATFORM. IT IS THROUGH COLLABORATION AND SHARING		
	OF THE WORLD'S COLLECTED KNOWLEDGE THAT LIBRARIES CAN HELP PEOPLE FIND		
	ANSWERS THEY NEED TO SOLVE PROBLEMS. TOGETHER AS OCLC, MEMBER		
			
4c	(Code) (Expenses \$) (Rev	venue \$	
			
4d	Other program services (Describe on Schedule O)		•
	(Expenses \$ including grants of \$) (Revenue \$)
1e	Total program service expenses 185,843,526.		- 000
			Form 990 (2
2002	01-20-20 SEE SCHEDULE O FOR CONTINUATION(S)		
	2		00-00-
305	505 141732 OCLC990 2019.05092 OCLC, INC.		OCLC99

BOFIORIPO

Form 990 (2019) OCLC, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98 19? If "Yes," complete Schedule C, Part III	5_		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_		
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		 ^-
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?]
	If "Yes," complete Schedule D, Part IV	9		_x
0	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	<u></u>
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	x	L
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
•	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	''	$\neg \neg$	
-	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		_x
0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
1	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			

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Part IV	Checklist o	f Required Schedules	(continued)

			162	140
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current		1	<u> </u>
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	Ļ _
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		,	
_	Schedule K If "No," go to line 25a	24a	Х	x
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b		+^
·	any tax-exempt bonds?	24c		x
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	х
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		╁╌
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%]		
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	x	
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	[[[
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions)			ļ
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
_	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	28b		 ^
·	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	<u> </u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		١., ١	1
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	26		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	_36_		
<i>3,</i>	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	- Ŭ.		
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			х
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter 0 if not applicable 118			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable [1b] [0]			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	_		
12200-	(gambling) winnings to prize winners?	1c	990 (2010
132004	01-20-20	-orm	J30 (2019)

Par	TV	Statements Regarding Other IRS Filings and Tax Compliance (continued)	·							
			1 1	_		Yes	No			
2a		er the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
		for the calendar year ending with or within the year covered by this return		989			ļ			
b		least one is reported on line 2a, did the organization file all required federal employment tax retu		 -	2b	Х	ļ			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)									
	Did the organization have unrelated business gross income of \$1,000 or more during the year?									
		es," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		F	3ь	х	ļ			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a									
_		ncial account in a foreign country (such as a bank account, securities account, or other financial	account) ²	<u> </u>	4a	х	 			
b		es," enter the name of the foreign country SEE SCHEDULE O)(FDAD)	-						
		instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accounts (FBAR)	-						
		the organization a party to a prohibited tax shelter transaction at any time during the tax year?		⊢	5a		x			
		any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	action		5b 5c		 ^ -			
		es" to line 5a or 5b, did the organization file Form 8886-T?	he ergenization solvet	H	3C		 			
va		s the organization have annual gross receipts that are normally greater than \$100,000, and did t contributions that were not tax deductible as charitable contributions?	ne organization solicit		6a		x			
h		es," did the organization include with every solicitation an express statement that such contribu	tions or diffs	<u> </u> -	Ua		 -			
U		ent tax deductible?	tions or girts		6ь					
7		anizations that may receive deductible contributions under section 170(c).		F	"		 			
	-	he organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices provided to the pavi	or? -	7a	—	x			
		es," did the organization notify the donor of the value of the goods or services provided?	,		7b					
		he organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required							
		e Form 8282?	·] .	7c		х			
d	If "Ye	es," indicate the number of Forms 8282 filed during the year	7d		\neg					
е	Did t	he organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contract?	7	7e		x			
f	Did ti	he organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7f		х			
g	If the	e organization received a contribution of qualified intellectual property, did the organization file F	orm 8899 as required?		7g					
h	If the	e organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz	ation file a Form 1098-0	'، [7h					
8	Spor	nsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the	_						
	spon	soring organization have excess business holdings at any time during the year?		L	8		<u> </u>			
9	Spor	nsoring organizations maintaining donor advised funds.		_						
а	Did t	he sponsoring organization make any taxable distributions under section 4966?		_ <u>L</u> s	9a		L			
b	Did t	he sponsoring organization make a distribution to a donor, donor advisor, or related person?		ئا	9b					
		cion 501(c)(7) organizations. Enter	1 1							
		tion fees and capital contributions included on Part VIII, line 12	10a							
		s receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	\dashv						
		ion 501(c)(12) organizations. Enter	الما	-	1					
		s income from members or shareholders	11a	\dashv	ı					
		s income from other sources (Do not net amounts due or paid to other sources against	11b	- 1	J					
		unts due or received from them) i on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		-	12a					
		es," enter the amount of tax-exempt interest received or accrued during the year	12b	H	12.0					
		ion 501(c)(29) qualified nonprofit health insurance issuers.		\dashv	ŀ					
		e organization licensed to issue qualified health plans in more than one state?		1	13a					
		: See the instructions for additional information the organization must report on Schedule O			\Box					
		the amount of reserves the organization is required to maintain by the states in which the								
		nization is licensed to issue qualified health plans	13b		- 1	- 1	[
	_	the amount of reserves on hand	13c	\Box			[
14a	Did th	he organization receive any payments for indoor tanning services during the tax year?		1	l4a		Х			
b	lf "Ye	es," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu	le O	1	4b					
15	is the	e organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	ration or							
	exces	ss parachute payment(s) during the year?			15	х				
	If "Ye	es," see instructions and file Form 4720, Schedule N		_],					
		e organization an educational institution subject to the section 4968 excise tax on net investmen	t income?	<u> </u> _1	16		_ <u>x</u>			
	If "Ye	es," complete Form 4720, Schedule O								
				F	-orm '	9 90 ((2019)			

Form	990 (2019) OCLC, INC. 31-073411	5	F	age (
	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for	"No"		
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions			
	Check if Schedule O contains a response or note to any line in this Part VI			Х
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1	4	ļ	1
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 1	4		1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	<u> </u>	l	
•	officer, director, trustee, or key employee?	2_		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		x
	of officers, directors, trustees, or key employees to a management company or other person?	4	-	x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		x
5	Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization base members or stockholders?	6	x	
6 72	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	┝	 	┢
/a	more members of the governing body?	7a	x	ļ
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	' ' ' '		┢
٥	persons other than the governing body?	7b		l x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			-
_	The governing body?	8a	<u></u>	
	Each committee with authority to act on behalf of the governing body?	8b	х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			ļ
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		<u> </u>
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	<u> </u>
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	 -		
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	₩-
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	١	v	
40	In Schedule O how this was done	12c	X	├─-
13	Did the organization have a written whistleblower policy?	13	X	-
14	Did the organization have a written document retention and destruction policy?	14		 -
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			l
•	The organization's CEO, Executive Director, or top management official	15a		
a b	Other officers or key employees of the organization	15b	х	\vdash
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	- 	-	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			[
	taxable entity during the year?	16a		x
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►CA, IN, NH, OR			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3))s only) avaıl	able
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, are	d finar	icial	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records 🕨			
	WILLIAM ROZEK - 614-764-6000			
	6565 KILGOUR PLACE, DUBLIN, OH 43017			

932006 01-20-20

Form **990** (2019)

OCLC9901

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A)	(B)	l g	21112		C)	mpc	1134	(D)	(E)	(F)
Name and title	Average hours per week	box	, unle	Pos heck ss pe	more rson	than is bot or/trus	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099 MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) DEATON, BRADY	8.00									
TRUSTEE - FINANCE & INVESTMENT CHAIR	<u> </u>	X		_	Ĺ.	<u> </u>	<u> </u>	31,250.	0.	0,
(2) ANDERSON, DR CRAIG	5.00									_
TRUSTEE		х	_	<u> </u>		<u> </u>	<u> </u>	25,250.	0.	0.
(3) HILSHEIMER, CINDY	8.00							24 252		
TRUSTEE - VICE BOARD CHAIR		Х	<u> </u>	├	⊢	<u> </u>	\vdash	31,250.	0.	0.
(4) KEANE, KATHLEEN	8.00							26 750	0	
TRUSTEE - PERSONNEL & COMP. CHAIR	0.00	X		-	├-		\vdash	36,750.	0.	0.
(5) LISON, BARBARA TRUSTEE - GOVERNANCE CHAIR	8.00	x						24,960.	0.	0
(6) NEAL JAMES	8.00	┢	\vdash	┝	\vdash		┝	24,500.		0.
TRUSTEE - FINANCE & INVESTMENT CHAIR	8.00	x						27,250.	0.	0.
(7) GRAY-LITTLE, BERNADETTE	5,00	<u> </u>		┢	-	_	 	27,230.	-	
TRUSTEE - AUDIT CHAIR	<u>-</u>	x						34,750.	0.	0.
(8) PATRICK, JOHN	8.00			\vdash	 		\vdash			
TRUSTEE		х			ŀ			25,250.	0.	0.
(9) STEEL VIRGINIA	5,00						$\overline{}$			
TRUSTEE - TECHNOLOGY PLANNING CHAIR		х						32,250.	0.	0.
(10) SZABO, JOHN	15.00									
TRUSTEE - BOARD & EXEC COMMITTEE CH		х						55,250.	0.	0.
(11) BYRD, THERESA	5.00									
TRUSTEE		х						_27,250.	0.	0.
(12) THOMAS, SARAH	5.00									
TRUSTEE		х						30,250.	0.	0.
(13) LEFEBVRE, MADELEIN	5.00								-	
TRUSTEE - MEMBERSHIP CHAIR		Х						32,416.	0.	0.
(14) MALSCHAERT, JACQUES	5.00									
TRUSTEE		х						23,000.	0.	0.
(15) PRESAS, JULIE	40.00									
GEN COUNSEL, VP OF LEGAL S				Х				353,109.	0.	56,461.
(16) PRICHARD, DAVID	40.00									
PRESIDENT & CEO				х				1,879,643.	0.	98,421.
(17) ROZEK, WILLIAM	40.00							_		
CFO, TREASURER				Х				664,900.	0.	78,332.

932007 01-20-20

Form **990** (2019)

Part VII Section A. Officers, Directors, (A)	(B)			(((D)	(E)	(F)
Name and title	Average hours per week	box	not c , unle: cer an	Pos heck ss pe	ition more rson i	than s bot	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highesi compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(18) BORDAS, ANDREW	40.00									
VP MANAGEMENT AND CUSTOMER					Х		Ь.	365,086.	0.	64,769
(19) CROCCO, BRUCE	40.00									i
VP LIBRARY SERVICES FOR TH			Ш		Х		L.	359,565.	0.	68,277
(20) DEMPSEY, LORCAN	40.00									
VP OCLC RESEARCH & CHIEF S					Х		L.	466,573.	0.	97,826
(21) MURPHY, BART	40.00									l
CHIEF INFORMATION OFFICER					Х			429,581.	0.	30,521
(22) NILGES, WILLIAM	40.00									
VP BUSINESS DEVELOPMENT					Х			336,273.	0.	89,038
(23) SAUER-GAMES, MARY	40.00									
VP PRODUCT MANAGEMENT					Х			372,658.	0.	57,616
(24) SPAYDE, TAMMI	40.00									
VP CORPORATE HUMAN RESOURC					Х			483,198.	0.	73,955
(25) VAN LUBEEK, ERIC	40.00									
VP MANAGING DIRECTOR EMEA					Х			404,550.	0.	22,245
(26) HOHLBEIN, BONNIE	40.00									
CONTROLLER						X		269,457.	0.	54,990
1b Subtotal								6,821,719.	0.	792,451
c Total from continuation sheets to Pa	art VII, Section A					i	▶	949,055.	0.	193,307
d Total (add lines 1b and 1c)							>	7,770,774.	0.	985,758

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

347

			Yes	No
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			Ĺ.,
	line 1a? If "Yes," complete Schedule J for such individual	3		Х
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	х	<u> </u>
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services	Γ		Π.
	rendered to the organization? If "Yes," complete Schedule J for such person	5		х

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
G2O LLC, 2500 CORPORATE EXCHANGE DR,	<u> </u>	
COLUMBUS, OH 43231	TECHNICAL SERVICES	1,809,325.
EXPEDIENT		
5700 INNOVATION DR, DUBLIN, OH 43017	TECHNICAL SUPPORT SERVICES	1,717,959.
LEVEL 3 COMMUNICATIONS LLC, 250 W OLD		
WILSON BRIDGE RD #130, WORTHINGTON, OH	TECHNICAL SERVICES	507,158.
MARSH & MCLENNAN AGENCY LLC]
655 METRO PL S #380, DUBLIN, OH 43017	CONSULTING SERVICES	430,612.
OXFORD GLOBAL RESOURCES LLC, 4555 LAKE		<u> </u>
FOREST DR #430, CINCINNATI, OH 45242	PROJECT CONSULTING	376,009.
2 Total number of independent contractors (including but not limited \$100,000 of compensation from the organization	d to those listed above) who received more than 22	

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2019)

OCLC, INC. Form 990

31-0734115

Part VII Section A. Officers, Directors		mple	yee	s, a	nd f	ligh	est	Compensated Employ	rees (continued)	
(A) Name and title	(B) Average hours	(C) Position (check all that app						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional frustee	Ойсег	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
27) GRIMES, NIC EXEC DIR - FINANCE	40.00					x		224,730.	0.	48,95
28) LIVINGSTON, SCOTT	40.00					х			0.	
XEC DIR - SOFTWARE DEVELO 29) HEYMAN, MARTI	40.00					^		261,153.		56,64
XEC. DIR - METADATA STRAT						х		230,637.	0.	54,0€
30) PEARSON, LORIANN KEC DIR - APPLICATIONS SE	40.00					х		232,535.	0.	33,64
				Н						
	_									
									-	*

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otal to Part VII, Section A, line 1c								949,055.		193,30

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Revenue excluded Total revenue Related or exempt Unrelated from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b **b** Membership dues Fundraising events 1c d Related organizations 634,748. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 1,733,488 similar amounts not included above Noncash contributions included in lines 1a-1f 2,368,236 Total. Add lines 1a-1f **Business Code** 2 a METADATA 91,128,419 91,128,419 519100 Program Service Revenue MANAGEMENT SYSTEMS 519100 55,847,670 55,847,670 42,868,469 RESOURCE SHARE SVCS 519100 42,868,469 18,476,010 END USER SERVICES 519100 18,476,010 2,505,066 519100 2,505,066 All other program service revenue 210,825,634. Total. Add lines 2a-2f Investment income (including dividends, interest, and 8,771,026 8,771,026 other similar amounts) Income from investment of tax-exempt bond proceeds 727. 727 Royalties (ı) Real (II) Personal 702,180 6 a Gross rents 6a 996,209 b Less rental expenses 6ь <294,029, 6c Rental income or (loss) <294,029. <294,029.> d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other 79,816,622 assets other than inventory b Less cost or other basis Other Revenue 89,203,532 201,600 and sales expenses <9,386,910 <200,721 c Gain or (loss) <9,587,631. <9,587,631.> d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10b b Less cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a WEB-LINKING COMMISSION 519100 82,496 82,496 All other revenue 82,496. Total. Add lines 11a-11d ▶ 212,166,459. 210,825,634. 82,496. <1,109,907.> Total revenue See instructions

932009 01-20-20

Form 990 (2019) OCLC, INC. Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

	Check if Schedule O contains a respon-	se or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	33,150.	33,150.		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16	12,859.	12,859.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	7,544,720.	3,298,591.	4,246,129.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	102,581,583.	92,772,767.	9,808,816.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	7,670,638.	7,293,233.	377,405.	
9	Other employee benefits	11,059,998.	9,285,306.	1,774,692.	
10	Payroll taxes	6,624,113.	5,947,105.	677,008.	
11	Fees for services (nonemployees)				
а	Management				
b	Legal	976,108.		976,108.	
С	Accounting	569,401.		569,401.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	123,371.		123,371.	
g	• •				
	column (A) amount, list line 11g expenses on Sch O.)	8,285,626.	7,711,605.	574,021.	
12	Advertising and promotion	332,891.	332,891.		
13	Office expenses	3,106,091.	2,528,735.	577,356.	
14	Information technology	15,202,791.	13,055,103.	2,147,688.	
15	Royalties	3,241,618.	3,241,618.		
16	Occupancy	6,243,795.	6,243,219.	576.	
17	Travel	3,703,781.	3,522,292.	181,489.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	757 462	755 236.	2 227	
19	Conferences, conventions, and meetings	757,463.		2,227.	
20	Interest	<4,192,427.	<4,192,427.>		
21	Payments to affiliates	29,472,402.	26,402,994.	3,069,408.	
22	Depreciation, depletion, and amortization	709,704.	642,768.	66,936.	
23 24	Other expenses Itemize expenses not covered	705,704.	094,700.		
24	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0				
а	OTHER NONOPERATING-PROG	4,561,023.	4,561,023.	0.	
b	PRODUCT & DISTRIBUTION	2,395,458.	2,395,458.	0.	
c	OTHER NONOPERATING-MGT	914,156.	0.	914,156.	
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	211,930,313.	185,843,526.	26,086,787.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here if following SOP 98-2 (ASC 958-720)				
932010	0 01-20-20		<u> </u>		Form 990 (2019)

OCLC9901

31-0734115

		Check if Schedule O contains a response or no	te to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			747.	1	·
	2	Savings and temporary cash investments			12,897,339.	2	33,278,436
	3	Pledges and grants receivable, net			139,527.	3	
	4	Accounts receivable, net			35,468,832.	4	43,069,186
	5	Loans and other receivables from any current o	r forme	officer, director,			
		trustee, key employee, creator or founder, subs	tantial o	contributor, or 35%			
		controlled entity or family member of any of the	se pers	ons	22,500.	5	11,250
	6	Loans and other receivables from other disquali	ified pe	sons (as defined			
		under section 4958(f)(1)), and persons describe	d in sec	tion 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			64,403.	8	11,957
Ä	9	Prepaid expenses and deferred charges			11,889,101.	9	10,106,756
	10a	Land, buildings, and equipment cost or other					
	ĺ	basis Complete Part VI of Schedule D	10a	149,257,119.			
	ь	Less accumulated depreciation	10b	101,617,728.	60,249,788.	10c	47,639,391
	11	Investments - publicly traded securities		_	210,697,370.	11	215,811,944
	12	Investments - other securities See Part IV, line	11		22,275,758.	12	10,792,699
	13	Investments - program-related See Part IV, line	11			13	
	14	Intangible assets			76,072,389.	14	89,124,718
	15	Other assets See Part IV, line 11			4,867,644.	15	3,536,400
	16	Total assets. Add lines 1 through 15 (must equ	al line 3	3)	434,645,398.	16	453,382,737
	17	Accounts payable and accrued expenses			38,036,149.	17	45,457,339
	18	Grants payable				18	
	19	Deferred revenue			36,244,648.	19	46,432,274
- 1	20	Tax-exempt bond liabilities			57,238,106.	20	68,283,459
	21	Escrow or custodial account liability Complete	Part IV	of Schedule D		21	
စ္က	22	Loans and other payables to any current or form	ner offic	er, director,			
≝		trustee, key employee, creator or founder, subs	tantial c	ontributor, or 35%			
Liabilities		controlled entity or family member of any of thes	se pers	ons		22	
ן כ	23	Secured mortgages and notes payable to unrela	ated thi	d parties		23	
	24	Unsecured notes and loans payable to unrelate	d third j	parties		24	
	25	Other liabilities (including federal income tax, pa		To the second se			
		parties, and other liabilities not included on lines	17-24)	Complete Part X			
		of Schedule D			37,513,528.	25	29,068,130.
	26	Total liabilities. Add lines 17 through 25			169,032,431.	26	189,241,202
]		Organizations that follow FASB ASC 958, che	ck her	. ▶ □			
š		and complete lines 27, 28, 32, and 33.		_			
<u>a</u>	27	Net assets without donor restrictions				27	
8	28	Net assets with donor restrictions				28	
틸		Organizations that do not follow FASB ASC 9	58, che	ck here ▶ X			
֡֡֡֓֟֝ <u>֟֝</u>		and complete lines 29 through 33.		_			
S	29	Capital stock or trust principal, or current funds		[0.	29	0.
Set	30	Paid-in or capital surplus, or land, building, or eq	Juipmer	t fund	0.	30	0.
As	31	Retained earnings, endowment, accumulated in			265,612,967.	31	264,141,535.
Net Assets or Fund Balances	32	Total net assets or fund balances	•		265,612,967.	32	264,141,535.
-		Total liabilities and net assets/fund balances			434 645 398.	33	453,382,737.

Form **990** (2019)

Form	990 (2019) OCLC, INC.	31-0734115		Pa	ge 12
`Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				<u> </u>
					0
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>, 459</u> .
2	Total expenses (must equal Part IX, column (A), line 25)	2	211	•	,313.
3	Revenue less expenses Subtract line 2 from line 1	3 .			,146.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		<u>- </u>	,967.
5	Net unrealized gains (losses) on investments	5		,515	964.
6	Donated services and use of facilities	6			
7	Investment expenses ' '	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9		, 223	,542.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32,				
_	column (B))	10	264	,141	<u>,535.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>			
			\Box	Yes	No
1	Accounting method used to prepare the Form 990				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	: O		—	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			l'
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,	}		
	consolidated basis, or both		1 1		
	Separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ie audit,		v	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	х	├
	If the organization changed either its oversight process or selection process during the tax year, explain on Sci				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			,
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit	_		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	Щ_
			Form	990	(2019)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public

Inspection Employer identification number Name of the organization 31-0734115 OCLC, INC Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. J Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III, functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations g Provide the following information about the supported organization(s) (iv) Is the organization listed (III) Type of organization (v) Amount of monetary (vi) Amount of other (ii) EIN (i) Name of supported (described on lines 1-10 support (see instructions) support (see instructions) organization above (see instructions))

932022 09-25-19

Schedule A (Form 990 or 990-EZ) 2019 OCLC, INC. Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to

Se	ction A. Public Support	below, please com	piete Part II)				· ·
	endar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and	12/22/2	(=/====	<u>,,</u> -,	107 - 107	(0) = (0)	
•	membership fees received (Do not						
	include any "unusual grants ")	621,971.	440,472.	770,245.	755,551.	2,368,236.	4,956,475
2	•			***************************************		2,000,000	,,
2	Gross receipts from admissions, merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpose	195,553,076.	206,042,058.	215,746,061.	220,142,270.	210,825,634.	1048309099
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513					_	
4	Tax revenues levied for the organ						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities			·	· · · · · · · · · · · · · · · · · · ·	·- -	
3	furnished by a governmental unit to						
	, ,					ł	
_	the organization without charge	106 175 047	206 492 530	216 516 206	220 007 021	212 102 070	1053365574
	Total. Add lines 1 through 5	196,175,047.	206,482,530.	216,516,306.	220,897,821.	213,193,870.	1053265574
7 a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons	988,570.	12,626.	11,641.			1,012,837
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year	326,163.					326,163
c	Add lines 7a and 7b	1,314,733.	12,626.	11,641.			1,339,000
	Public support. (Subtract line 7c from line 6.)						1051926574
	ction B. Total Support		<u> </u>		<u> </u>		
~	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6	196,175,047.	206,482,530.	216,516,306.	220,897,821.	213,193,870.	1053265574
	Gross income from interest,	230,273,047.	200,300,000.	<u> </u>			
104	dividends, payments received on						
	securities loans, rents, royalties,			10 405 004	44 040 030		
	and income from similar sources	9,395,678.	9,357,828.	11,195,204.	11,848,038.	9,473,933.	51,270,681
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975	47,274.	44,695.	42,446.	93,234.	46,057.	273,706
С	Add lines 10a and 10b	9,442,952.	9,402,523.	11,237,650.	11,941,272.	9,519,990.	51,544,387
11	Net income from unrelated business						
	activities not included in line 10b,					ľ	
	whether or not the business is regularly carried on	l		i		1	
12	Other income Do not include gain						
	or loss from the sale of capital						
40	assets (Explain in Part VI)	205 617 000	215,885,053.	227,753,956.	232,839,093.	222 712 960	1104809961
	Total support (Add lines 9, 10c, 11, and 12)	205,617,999.				222,713,860.	
14	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	n 501(c)(3) organiza	ation,
	check this box and stop here						
	ction C. Computation of Publi						
	Public support percentage for 2019 (I		=	column (f))		15	95.21 %
_	Public support percentage from 2018		_			16	94.55 %
Sec	tion D. Computation of Inves	stment Income	e Percentage				
17	Investment income percentage for 20	19 (line 10c, colum	nn (f), divided by lir	ne 13, column (f))		17	4.67 %
18	Investment income percentage from 2	2018 Schedule A, F	Part III, line 17			18	4.92 %
19a	33 1/3% support tests - 2019. If the	organization did n	ot check the box o	on line 14, and line	15 is more than 3	3 1/3%, and line 17	r is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization qualif	es as a publicly su	upported organiza	tion	\mathbf{x}
b	33 1/3% support tests - 2018. If the						nd
	line 18 is not more than 33 1/3%, che	•					
	Private foundation. If the organization					-	
	3 09-25-19	C.C (IC OFFICER & I				dule A (Form 990	or 990-EZ) 2019

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

		Yes	No
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932024 09-25-19

	edule A (Form 990 or 990-EZ) 2019 OCLC, INC.	31-0734115	Pa	age 5
Pa	rt IV Supporting Organizations (continued)	· · · · · · · · · · · · · · · · · · ·		
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	ļ <u>-</u> .	<u> </u>	<u>.</u> .
	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	etion B. Type I Supporting Organizations	1		
360	don B. Type i dapporting digamentations		Yes	No
	District districts and the second supplies of the power to		163	140
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		1	ŀ
	controlled the organization's activities. If the organization had more than one supported organization,		}	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		ļ
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	<u> </u>	l	
	supervised, or controlled the supporting organization	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
				
500	the supported organization(s) tion D. All Type III Supporting Organizations			
Sec	tion D. All Type III Supporting Organizations		V	Na
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	'		
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	<u> </u>		
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			İ
	supported organizations played in this regard	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeatsee in	etructions)		
-		su ucuons _j .		
a	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below	titi / /aaa isaat- istisaa	-1	
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity	ny (see instructions		
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	<u> </u>		
	that these activities constituted substantially all of its activities	2a		
ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
_	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
		2b		
_	activities but for the organization's involvement	20	\vdash	
3	Parent of Supported Organizations Answer (a) and (b) below.			
а				
	trustees of each of the supported organizations? Provide details in Part VI.	3a	-	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		
93202	5 09-25-19 Schedule	A (Form 990 or 99	30-EZ)	2019

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust o	n Nov 20, 1970 (explain in	Part VI) See instructions.
	other Type III non-functionally integrated supporting organizations must c	omplete S	Sections A through E	
Sect	con A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		, i
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6		6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
ect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	lly integra	ted Type III supporting org	anization (see
	instructions)	_		•

Schedule A (Form 990 or 990-EZ) 2019

Pa	π v Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations (continued)	-
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes	<u> </u>	
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ns	
4	Amounts paid to acquire exempt-use assets			
_5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7_	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	he organization is responsiv	e	
	(provide details in Part VI) See instructions			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			1
	From 2016			
	From 2017			
	From 2018			
	Total of lines 3a through e			·
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount	<u> </u>		
	Carryover from 2014 not applied (see instructions)			
	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2019 from Section D,	·	·	<u> </u>
	line 7 \$			
.—а	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount	<u> </u>		·-··
	Remainder Subtract lines 4a and 4b from 4	· 		
5	Remaining underdistributions for years prior to 2019, if			
•	any Subtract lines 3g and 4a from line 2 For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2019 Subtract lines 3h	······································		
J	and 4b from line 1. For result greater than zero, explain in			
	Part VI See instructions			
-	Excess distributions carryover to 2020. Add lines 3			
7	•			
	and 4c			 -
	Breakdown of line 7			
	Excess from 2015		···-	
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
<u>е</u>	Excess from 2019			<u> </u>

Schedule A (Form 990 or 990-EZ) 2019

\$CHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

OMB No 1545-0047

Inspection

Name of the organization

Employer identification number

Da	rt I Organizations Maintaining Donor Advise	od Funds or Other Similar Funds o	r Accou	Ints Complete if the
Pa			" ACCOL	arts.Complete ii trie
	organization answered "Yes" on Form 990, Part IV, Iir	(a) Donor advised funds	(b) Fur	nds and other accounts
		(a) bonor advised fands	(6) (6)	ids and other accounts
1	Total number at end of year	1-1-1		
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year	A Ab A		
5	Did the organization inform all donors and donor advisors in		tunas	Yes No
	are the organization's property, subject to the organization's			Yes NO
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose co	nierring	Yes No
Pa	impermissible private benefit? It II Conservation Easements. Complete if the org	gangation answered "Vas" on Form 990. Par	t IV line 7	
<u> </u>			tiv, iiie i	
1	Purpose(s) of conservation easements held by the organizat		notorio alli	umportant land area
	Preservation of land for public use (for example, recrea	′ —	•	mportant land area
	Protection of natural habitat	Preservation of a	sertified fil	stone structure
_	Preservation of open space	final name water an anti-button in the form of		ation aggregates the last
2	Complete lines 2a through 2d if the organization held a quali	fled conservation contribution in the form of	a conserv	Held at the End of the Tax Year
	day of the tax year		20	Held at the Liid of the Tax Tear
a	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements	westure meluded in (a)	2b	-
С.	Number of conservation easements on a certified historic str		2c	
a	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structure	, 2d	
•	listed in the National Register	leased sytuational or terminated by the o		n during the tay
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the o	rgariizatio	in during the tax
_	year >	noment in located		
4	Number of states where property subject to conservation ea Does the organization have a written policy regarding the pe			
5	-			Yes No
	violations, and enforcement of the conservation easements is Staff and volunteer hours devoted to monitoring, inspecting,		vation eas	
6	Stan and volunteer hours devoted to monitoring, inspecting,	Training of Violations, and emorning conservation	valion out	Joine No dailing wile year
7	Amount of expenses incurred in monitoring, inspecting, hand	tling of violations, and enforcing conservation	n easeme	nts during the year
7	\$\\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$	sing of violations, and childrening conscivation	caso	me daming the year
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)	(4)(B)(i)	
Ü	and section $170(h)(4)(B)(u)$?	to satisfy the requirements of section 11 etc.)	(- /(- /(- /	Yes No
9	In Part XIII, describe how the organization reports conservati	ion easements in its revenue and expense st	atement a	
3	balance sheet, and include, if applicable, the text of the footi			
	organization's accounting for conservation easements			
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Oth	er Simil	ar Assets.
	Complete if the organization answered "Yes" on Form			
1a	If the organization elected, as permitted under FASB ASC 95		balance	sheet works
	of art, historical treasures, or other similar assets held for pul			
	service, provide in Part XIII the text of the footnote to its final			
ь	If the organization elected, as permitted under FASB ASC 95		ance shee	et works of
	art, historical treasures, or other similar assets held for public			
	provide the following amounts relating to these items			
	(i) Revenue included on Form 990, Part VIII, line 1		•	\$
	(ii) Assets included in Form 990, Part X		•	\$ \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial g		
_	the following amounts required to be reported under FASB A			
а	Revenue included on Form 990, Part VIII, line 1	-	>	\$
	Assets included in Form 990 Part X		•	s

932051 10-02-19

Schedule D (Form 990) 2019

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Sche	edule D (Form 990) 2019 OCLC, INC.							31-0734	115	Page 2
Pa	rt III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures,	or Oth	er Simil	ar Asse	ts(contin	ued)
3	Using the organization's acquisition, access	ion, and other recor	ds, ched	k any of the	following th	at make	significant	use of its		_
	collection items (check all that apply)									
а	Public exhibition		d 🖳	Loan or exc	hange prog	ram				
b	Scholarly research		e 🗀	Other						
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and expla	in how t	hey further t	he organizat	tion's exe	empt purp	ose in Par	t XIII	
5	During the year, did the organization solicit of	or receive donations	of art, h	istorical trea	sures, or oth	her sımıla	r assets		_	
	to be sold to raise funds rather than to be m	aintained as part of	the orga	anization's co	ollection?				Yes	No_
Pa	rt IV Escrow and Custodial Arran	gements. Comp	lete if th	e organizatio	n answered	"Yes" or	Form 99	0, Part IV,	line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21		_						
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for	contribution	ns or other a	ssets not	t included		_	
	on Form 990, Part X?							L	」Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the f	ollowing	table						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f		,	
2a	Did the organization include an amount on F	orm 990, Part X, line	∋ 21, for	escrow or co	ustodial acc	ount liabi	lity?		」Yes	<u></u> №
_	If "Yes," explain the arrangement in Part XIII									
Pa	rt V Endowment Funds. Complete	f the organization a	nswered	"Yes" on Fo						
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back	(d) Three y	rears back	(e) Four	years back
1a	Beginning of year balance		ļ							
b	Contributions		ļ		ļ					
С	Net investment earnings, gains, and losses		ļ							
d	Grants or scholarships		ļ							
е	Other expenditures for facilities									
	and programs		<u> </u>		ļ <u> </u>			-		
f	Administrative expenses									
9	End of year balance		L							
2	Provide the estimated percentage of the cur	rent year end balan	ce (line 1	g, column (a	a)) held as					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С		%								
	The percentages on lines 2a, 2b, and 2c sho	•								
3a	Are there endowment funds not in the posse	ssion of the organiz	ation th	at are held a	nd administi	ered for t	he organiz	ation	Г.	
	by								-	Yes No
	(i) Unrelated organizations								3a(i)	——
	(ii) Related organizations			N.L.J. I. FA					3a(ii)	 -
ь	If "Yes" on line 3a(ii), are the related organiza	,							3b	
Do:	Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm		owment	tunds			-			
rai			0 0-41	/ luna 44 a . C	`	0 D-4 V	l 10			
	Complete if the organization answered							, ,	(0.5.)	
	Description of property	(a) Cost or o		(b) Cost basis (ccumulate preciation	a	(d) Book	value
	1004	basis (investi	nem)			Get	alion			705 121
	Land				,705,121.		56 721	222	<u>_</u>	705,121.
	Buildings				,393,758.		56,731,		<u>_</u>	662,536.
	Leasehold improvements	ļ ————			,457,799.		2,421,			036,023.
	Equipment			04	,700,441.		42,464,	,30.	44,	235,711.
	Other		V'	nn /P\ /== 1	001			_ 		630 301
ı otal	l. Add lines 1a through 1e (Column (d) must e	quai roiiii <u>9</u> 90, Pan	A, COIUI	ııı (a), iine T	UC)				4/,	639,391.

Schedule D (Form 990) 2019

Part VII Investments - Other Securities.		14h 0 F 000 B-+V b 10	· · · · · · · · · · · · · · · · · · ·
Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or en	d-of-vear market value
	(b) Book value	(e) Method of Valuation Cost of Ch	d or year market value
(1) Financial derivatives		<u> </u>	
(2) Closely held equity interests		 	
(3) Other			
(A)		<u> </u>	
(B)			
(C)		 	-
(D)			
(E)	<u> </u>		
<u>(F)</u>	ļ		
(G)	<u> </u>		
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12)	<u> </u>	<u> </u>	
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			al af consumant at color
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or en	d-ot-year market value
	<u> </u>		-
(2)	<u> </u>		
(3)	<u> </u>		
(5)			
(6)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	<u> </u>	<u></u>	
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d See Form 990, Part X, line 15.	
	Description		(b) Book value
(1)			·-
(2)			·
(3)			
(4)			
(5)		·· ·	-
(6)			
(7)			-
(8)			
(9)		-	
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15)		
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) DEFERRED RETIREMENT			324,082.
(3) POST RETIREMENT BENEFITS			18,075,315.
(4) MEMBERS SUBSCRIPTION BALANCES			9,108,973.
(5) OTHER LIABILITIES			1,559,760.
(6)			
(7)			
(8)			
(9)		_	· · · ·
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 25)		29,068,130;
2. Liability for uncertain tax positions. In Part XIII, provide		the organization's financial statements	
organization's liability for uncertain tax positions under			· —

Schedule D (Form 990) 2019

1	Total revenue, gains, and other support per audited financial statements	e_12a		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			-	
	Net unrealized gains (losses) on investments	2a		1 1	
	Donated services and use of facilities	2b			
	Recoveries of prior year grants	2c			
	Other (Describe in Part XIII)	2d			
	Add lines 2a through 2d	<u> </u>		2e	
	Subtract line 2e from line 1			3	
-	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII)	4b			
	Add lines 4a and 4b			4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
	XII Reconciliation of Expenses per Audited Financial Sta	tements W	ith Expenses).
	Complete if the organization answered "Yes" on Form 990, Part IV, line		•	•	
1	Total expenses and losses per audited financial statements		_	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				•
	Donated services and use of facilities	2a			
	Prior year adjustments	2b			
	Other losses	2c		-	
	Other (Describe in Part XIII)	2d		-	
	Add lines 2a through 2d	<u> </u>		2e	
	Subtract line 2e from line 1			3	
	Amounts included on Form 990, Part IX, line 25, but not on line 1			-	
	investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII)	4b			
~	Add lines 4a and 4b				
· ·				I 4c I	
5 Part	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any	Part IV, lines 1		line 4, Part X,	line 2, Part XI,
5 Part	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part IV, lines 1		5	line 2, Part XI,
Part rovid	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part IV, lines 1		5	line 2, Part XI,
Part rovid nes 2	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any	Part IV, lines 1		5	line 2, Part XI,
Fart rovid nes 2	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any X, LINE 2:	Part IV, lines 1 y additional info		5	line 2, Part XI,
Part rovid nes 2 ART NFOR	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any X, LINE 2: MATION REQUIRED IN SCH D, PART X REGARDING THE FINANCIAL STATES.	Part IV, lines 1 y additional info		5	line 2, Part XI,
5 Part Part Providences 2 Part Providences 2 Part Part Part Part Part Part Part Part	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any X, LINE 2: MATION REQUIRED IN SCH D, PART X REGARDING THE FINANCIAL STOTE FOR LIABILITY FOR UNCERTAIN TAX POSITIONS UNDER FIN 40.	Part IV, lines 1 y additional info STATEMENT B (FASB (ES), THIS		5	line 2, Part XI,
Part Part Part Part Part Part Part Part	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any X, LINE 2: MATION REQUIRED IN SCH D, PART X REGARDING THE FINANCIAL STOTE FOR LIABILITY FOR UNCERTAIN TAX POSITIONS UNDER FIN 41 PRETATION NO. 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAX	Part IV, lines 1 y additional infe		5	line 2, Part XI,
Part Provide ness 2 ART NFOR OOTN NTER S NO	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any X, LINE 2: MATION REQUIRED IN SCH D, PART X REGARDING THE FINANCIAL STATEMENT OF THE FOOTNOTE IN COLOTION OF THE FOOTNOTE IN OCLC'S CONSOLIDATED FINANCIAL STATEMENT OF THE FOOTNOTE IN OCLC'S CONSOLIDATED FINANCIAL STATEMENT	Part IV, lines 1 y additional infe		5	line 2, Part XI
Part rovid nes 2 ART NFOR OOTN NTER S NO	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any X, LINE 2: MATION REQUIRED IN SCH D, PART X REGARDING THE FINANCIAL STOTE FOR LIABILITY FOR UNCERTAIN TAX POSITIONS UNDER FIN 40 PRETATION NO. 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAX W CODIFIED AS ACCOUNTING STANDARDS CODIFICATION (ASC) 740-	Part IV, lines 1 y additional infe		5	line 2, Part XI
Part Part Part Part Part Part Part Part	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any X, LINE 2: MATION REQUIRED IN SCH D, PART X REGARDING THE FINANCIAL STATEMENT OF THE FOOTNOTE IN COLOTION OF THE FOOTNOTE IN OCLC'S CONSOLIDATED FINANCIAL STATEMENT OF THE FOOTNOTE IN OCLC'S CONSOLIDATED FINANCIAL STATEMENT	Part IV, lines 1 y additional info STATEMENT 3 (FASB (ES). THIS -10. THE		5	line 2, Part XI
Part Part Part Part Part Part Part Part	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4 d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any X, LINE 2: MATION REQUIRED IN SCH D, PART X REGARDING THE FINANCIAL STOTE FOR LIABILITY FOR UNCERTAIN TAX POSITIONS UNDER FIN 40 PRETATION NO. 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAX W CODIFIED AS ACCOUNTING STANDARDS CODIFICATION (ASC) 740-00 OF THE FOOTNOTE IN OCLC'S CONSOLIDATED FINANCIAL STATEMENT ED BY OCLC'S INDEPENDENT AUDITOR, BDO, IS AS FOLLOWS:	Part IV, lines 1 y additional infe		5	line 2, Part XI
Part Part For incompany Part Par	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any X, LINE 2: MATION REQUIRED IN SCH D, PART X REGARDING THE FINANCIAL STOTE FOR LIABILITY FOR UNCERTAIN TAX POSITIONS UNDER FIN 40 PRETATION NO. 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAX W CODIFIED AS ACCOUNTING STANDARDS CODIFICATION (ASC) 740-0F THE FOOTNOTE IN OCLC'S CONSOLIDATED FINANCIAL STATEMENT ED BY OCLC'S INDEPENDENT AUDITOR, BDO, IS AS FOLLOWS: NTING STANDARDS CODIFICATION (ASC) 740-10, INCOME TAXES, A	Part IV, lines 1 y additional infe		5	line 2, Part XI
Pari rovid nes 2 ART NFOR NTER S NO EXT UDIT	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any X, LINE 2: MATION REQUIRED IN SCH D, PART X REGARDING THE FINANCIAL STOTE FOR LIABILITY FOR UNCERTAIN TAX POSITIONS UNDER FIN 40 PRETATION NO. 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAX W CODIFIED AS ACCOUNTING STANDARDS CODIFICATION (ASC) 740-0F THE FOOTNOTE IN OCLC'S CONSOLIDATED FINANCIAL STATEMENT ED BY OCLC'S INDEPENDENT AUDITOR, BDO, IS AS FOLLOWS: NTING STANDARDS CODIFICATION (ASC) 740-10, INCOME TAXES, ACCOUNTING FOR UNCERTAINTIES IN INCOME TAXES RECOGNIZED IN	Part IV, lines 1 y additional infe		Ine 4, Part X,	line 2, Part XI

Schedule D (Form 990) 2019 OCLC, INC.	31-0734115	Page 5
Schedule D (Form 990) 2019 OCLC, INC. Part XIII Supplemental Information (continued)		
TO BE TAKEN IN A TAX RETURN. ASC 740-10 ALSO PROVIDES RELATED GUIDANCE ON		
MEASUREMENT, CLASSIFICATION, INTEREST AND PENALTIES, AND DISCLOSURE. OCLC		,
EVALUATED ITS TAX POSITIONS AT JUNE 30, 2020 AND 2019. BASED ON THIS		
EVALUATION, OCLC DETERMINED THAT THERE WAS NO MATERIAL IMPACT TO THE		
CORPORATION'S CONSOLIDATED FINANCIAL STATEMENTS.		
	-	
 		
	· · · · · · · · · · · · · · · · · · ·	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990. Part IV, line 14b. 15. or 16.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number Name of the organization 31-0734115 OCLC, INC. General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the **United States** Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (e) If activity listed in (d) (f) Total (a) Region (b) Number of (c) Number of (d) Activities conducted in the region employees, expenditures (by type) (such as, fundraising, prois a program service, offices agents, and independent contractors for and describe specific type in the region gram services, investments, grants to investments recipients located in the region) of service(s) in the region in the region in the region CHINA AND AUSTRALIA PROVIDING INFORMATION ABOUT OCLC SERVICES TO EAST ASIA AND THE LIBRARIES. 4,028,000. PACIFIC PROGRAM SERVICES QUEBEC AND ALBERTA (HOME OFFICE), SALES SOLICITATION AND NORTH AMERICA PROGRAM SERVICES INFORMATION ABOUT OCLC 1,458,000. (OUTSIDE USA) MANITOBA, TECHNICAL SERVICES FOR OCLC NORTH AMERICA 976,000. (OUTSIDE USA) 12 PROGRAM SERVICES CUSTOMERS. DISREGARDED SUBS PROVIDING LIBRARY SERVICES AND SUPPORT TO PROGRAM SERVICES LIBRARIES IN EUROPE. 44,173,000. EUROPE FY20 BOARD AND EMEA REGIONAL COUNCIL MEETING WAS NOT HELD IN PERSON 0. EUROPE GOVERNANCE - REGIONAL COUNCIL MEETING IN EAST ASIA AND THE 44,000. SINGAPORE PACIFIC 50,679,000. 12 396 3 a Subtotal **b** Total from continuation 0 sheets to Part I c Totals (add lines 3a

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. SEE PART V FOR COLUMN (E) DESCRIPTIONS

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Schedule F (Form 990) 2019

932071 10-12-19

50,679,000.

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Schedule F (Form 990) 2019 OCLC, INC.

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any

recipient who received more than \$5,000 Part II can be duplicated if additional space is needed

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA,	LIBRARY ASSITANCE GRANT	10,773.CHECK	СНЕСК			
-								
						-		
	recipient organizatio ch the grantee or cou	ns listed above that are insel has provided a sec	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	e foreign country, er	recognized as tax-e	empt		0
3 Enter total number of other organizations or entities	other organizations	or entities				_		E

Schedule F (Form 990) 2019

31-0734115

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Pagé 3

OCLC, INC.

Schedule F (Form 990) 2019

Part III] Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16

Part III can be duplicated if additional space is needed

_	}	1	1	1	1	1	1	1	919
(h) Method of valuation (book, FMV, appraisal, other)									Schedule F (Form 990) 2019
(g) Description of noncash assistance									Sched
(f) Amount of noncash assistance									
(e) Manner of cash disbursement									
(d) Amount of cash grant									1
(c) Number of recipients									
(b) Region									
(a) Type of grant or assistance									

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)

X Yes No

Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)

Yes X No

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)

X Yes No

Schedule F (Form 990) 2019

932075 10-12-19

SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▼ Attach to Form 990.

OMB No 1545-0047 ..

▶ Go to www.irs.gov/Form990 for the latest information.

ž [**Employer identification number** IBRARY AND INFO SCIENCE OPERATING SUPPORT FOR OPERATING SUPPORT AND (h) Purpose of grant or assistance ODE4LIB CONFERENCE UNDING FOR VARIOUS 31-0734115 OPERATING SUPPORT OPERATING SUPPORT X Yes RESEARCH GRANT Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any AWARDS Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) ö . ٥. ٥. Ö (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (d) Amount of cash grant 3,750. 10,000. 4 000 10,000 5,400 (c) IRC section (if applicable) 501(C)(3) 31-6401170 \$01(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 31-4393712 82-4997087 36-2166947 53-6002532 Part | General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization OCIC, INC COLUMBUS METROPOLITAN LIBRARY AMERICAN LIBRARY ASSOCIATION UNITED WAY OF CENTRAL OHIO or government 101 INDEPENDENCE AVE SE 360 SOUTH THIRD STREET 450 WEST BROAD STREET 50 EAST HURON STREET WASHINGTON, DC 20540 LIBRARY OF CONGRESS Name of the organization COLUMBUS, OH 43215 COLUMBUS, OH 43215 COLUMBUS, OH 43215 96 S. GRANT STREET CHICAGO, IL 60611 PELOTONIA

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) (2019)

Schedule I (Form 990) (2019) (f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed (d) Amount of non-cash assistance 37 (c) Amount of cash grant ELIGIBLE SCHOOLS AN ANNUAL CALL FOR PROPOSALS, APPLICANTS RESPOND WITH PROPOSALS A COVER PAGE AND PROPOSAL, A DETAILED BUDGET, AND SUPPORTING MATERIALS ARE REVIEWED AND SELECTED BY OCLC STAFF AND THEN SUBMITTED TO A REVIEW PANEL FOR FURTHER EVALUATION AND COMMENDATION TO THE VICE PRESIDENT OF RESEARCH RESULTS FACULTY IN SCHOOLS OF LIBRARY SCIENCE ARE ELIGIBLE TO APPLY, OCLC ISSUES TO (b) Number of recipients AND LETTERS OF SUPPORT. LIBRARY AND INFORMATION SCIENCE RESEARCH GRANT PROGRAM: OCLC OFFICE OF RESEARCH, WHO MAKES A FINAL DECISION. (a) Type of grant or assistance STAFFING, SUCH AS A CURRICULA VITAE, PART I, LINE 1(H) 932102 10-26-19 Part III

Page 2

31-0734115

OCIC, INC.

Schedule I (Form 990) (2019)

Schedule I (Form 990) OCLC, INC.	31-0734115	Page 2
Part IV Supplemental Information		
ARE FURNISHED TO OCLC IN A FINAL PROJECT REPORT WHICH MUST BE		
NONPROPRIETARY AND IN THE PUBLIC DOMAIN.		
OTHER CONTRIBUTIONS ARE MADE FOR THE GENERAL OPERATING SUPPORT OF		
VARIOUS GOVERNMENTAL ORGANIZATIONS AND NATIONAL OR LOCAL PUBLIC		
CHARITIES.		

<u></u>	-	
		-

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ➤ Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

OCLC, INC.

Employer identification number

31-0734115 **Questions Regarding Compensation** Part I Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items X First-class or charter travel ☐ Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions X Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or X 1b reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, 2 х trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee x Independent compensation consultant Compensation survey or study Approval by the board or compensation committee X Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization Х 4a Receive a severance payment or change-of-control payment? х 4b b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4c Х c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of Х 5a a The organization? х 5b b Any related organization? If "Yes" on line 5a or 5b, describe in Part III 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of 6a X a The organization? 6b х b Any related organization? If "Yes" on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments 7 х not described on lines 5 and 69 If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the ınıtıal contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 Х

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

Schedule J (Form 990) 2019

Regulations section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of	W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	peneiris	(a)-(ı)(a)	in column (b) reported as deferred on prior Form 990
(1) PRESAS, JULIE	Ξ	221,008	123,000.	9,101.	50,788.	5,673.	409,570	0.
GEN COUNSEL, VP OF LEGAL S	Ξ	0	0	0	0	0	0.	0.
(2) PRICHARD, DAVID	Ξ	817,633.	1,017,618.	44,392.	78,285.	20,137.	1,978,065.	0.
PRESIDENT & CEO	Ξ	0	.0	0	0	0.	0	0.
(3) ROZEK, WILLIAM	Ξ	375,694.	281,135.	8,071.	78,283.	. 50.	743,233.	0.
CFO, TREASURER	Œ	0	.0	0	0	0.	0.	0.
(4) BORDAS, ANDREW	(1)	232,163.	131,285.	1,638.	44,709.	20,059.	429,854.	0
VP MANAGEMENT AND CUSTOMER	<u> </u>	0	.0	0	0.	0.	0	0.
(5) CROCCO, BRUCE	Ξ	210,272.	143,451.	5,842.	55,640.	12,636.	427,841.	0.
VP LIBRARY SERVICES FOR TH	(ii)	0	0	0	0	0.	0.	0.
(6) DEMPSEY, LORCAN	Ξ	290,069	164,216.	12,288.	77,588.	20,238.	564,399.	0
VP OCLC RESEARCH & CHIEF S	<u> </u>	0	.0	0	0	0.	0.	0.
(7) MURPHY, BART	Ξ	325,700.	100,959.	2,922.	24,833.	5,687.	460,101.	0.
CHIEF INFORMATION OFFICER	Ξ	0.	0.	0	0	0	0.	0.
(8) NILGES, WILLIAM	Ξ	211,807.	120,422.	4,044.	68,981.	20,057.	425,311.	0,
	3	0.	0.	0.	0	0	0.	0.
(9) SAUER-GAMES, MARY	Ξ	235,656	132,016.	4,986.	.149,13	5,675.	430,274.	0.
VP PRODUCT MANAGEMENT	Ξ	0.	0.	0.	0	0	0	0.
(10) SPAYDE, TAMMI	Ξ	312,261	163,387.	7,550.	*588'ES	20,070.	557,153.	0.
~ 1	Ξ	0.	0.	0	0	0	0	0.
(11) VAN LUBEEK, ERIC	Ξ	333,141,	47,045.	24,364.	22,245.	0	426,795.	0.
VP MANAGING DIRECTOR EMEA	Ξ	0 0	0.	0.	0	0	0.	0.
(12) HOHLBEIN, BONNIE	(i)	210,810	53,577.	5,070.	49,318.	5,672.	324,447.	0.
CONTROLLER	▣	0.	0.	0	0	0	0.	0.
(13) GRIMES, NIC	Ξ	172,862	50,610.	1,258.	.236,952.	18,998,	273,680.	0.
EXEC DIR - FINANCE	Ξ	0.	0.	0	0.	0.	0.	0.
(14) LIVINGSTON, SCOTT	Ξ	203,575,	54,790.	2,788.	36,416.	20,226.	317,795.	0.
EXEC DIR - SOFTWARE DEVELO	Ξ	0.	0.	0.	0	0	0	0.
HEYMAN, MARTI	Ξ	188,461	38,843.	3,333.	41,353.	12,713.	284,703.	0.
	Ξ	0	0.	0.	0	0	0	0
PEARS	Ξ	186,269	44,347.	1,919.	21,538.	12,112.	266,185.	0
EXEC DIR - APPLICATIONS SE	3	0.	0.[0.	0	0	0.	0.
				7			Schedu	Schedule J (Form 990) 2019

Schedule J (Form 990) 2019

Schedule J (Form 990) 2019 OCLC, INC.	31-0734115 Page'3	ဗ
Part III Supplemental Information Part III Part III Supplemental Information Part III Paper III Pa	his part for any additional information	;
		l
PART I, LINES 4A-B		
SOME INDIVIDUALS REPORTED IN PART VII PARTICIPATED IN A SPLIT-DOLLAR LIFE		
INSURANCE PLAN, THEY ARE LISTED BELOW TOGETHER WITH THE AMOUNT OF TAXABLE		
COMPENSATION REPORTED DUE TO THEIR PARTICIPATION.		
BRUCE CROCCO 2,950		
LORCAN DEMPSEY 4,006		
WILLIAM NILGES 1,983		
		l
PART I, LINE 7:		
OCLC MAINTAINS THREE DIFFERENT INCENTIVE COMPENSATION PLANS THAT ARE BASED		
IN PART ON THE GLOBAL PERFORMANCE OF OCLC AND ITS SUBSIDIARIES. A		
PERCENTAGE OF TOTAL COMPENSATION IS CONSIDERED VARIABLE COMPENSATION AND		1
DEPENDS UPON THE OUTCOME OF SPECIFIC PLAN OBJECTIVES. THE PLANS ARE THE		
SALES INCENTIVE PLAN (SIP), THE MANAGEMENT INCENTIVE PLAN (MIP) AND THE		
LONG-TERM INCENTIVE PLAN (LTIP). EXECUTIVES ARE PARTICIPANTS IN BOTH THE	9 .	1
MIP AND THE LTIP, ALL PERFORMANCE AWARDS FOR THE CEO AND OTHER EXECUTIVES		١
ARE REVIEWED AND APPROVED BY THE OCLC BOARD OF TRUSTEES. ALL INCENTIVE		
	Schedule J (Form 990) 2019	119

Schedule J (Form 990) 2019 OCLC, INC.	31-0734115 Page 3	പ
Part iii Supplemental information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information	this part for any additional information	;
PLANS ARE REGULARLY REVIEWED BY OUTSIDE COMPENSATION CONSULTANTS, THE LAST		1 1
SUCH OCCURRING IN MARCH 2018.		
		l I
PART I, LINE 8:		
THE ORGANIZATION ENGAGED A NEW EXECUTIVE DURING THE FISCAL YEAR ENDING JUNE		ı
30, 2014, WHO WAS NOT A DISQUALIFIED PERSON PRIOR TO ENTERING INTO THE		ı
CONTRACT. THE BASE SALARY WAS FIXED AND THUS SUBJECT TO THE INITIAL		ı
CONTRACT EXCEPTION. NEVERTHELESS, THE ORGANIZATION FOLLOWED THE REBUTTABLE		
PRESUMPTION PROCEDURES IN DETERMINING THE REASONABLENESS OF THE EXECUTIVE'S		
COMPENSATION.		
		l 1
DESCRIPTION OF OCLC MANAGEMENT SAVINGS PLAN		
EFFECTIVE JULY 1, 1997, AND EXTENDING THROUGH APRIL 30, 2002 CERTAIN		ı
EMPLOYEES AND TRUSTEES ELECTED TO PARTICIPATE IN THE OCLC MANAGEMENT		ı
SAVINGS PLAN (THE PLAN), A NON-QUALIFIED INCENTIVE BENEFIT PROGRAM FOR		1
CERTAIN EMPLOYEES AND TRUSTEES WHO CONTRIBUTED TO THE SUCCESS OF OCLC.		
EFFECTIVE MAY 1, 2002, THE PLAN WAS PROZEN AND NO ADDITIONAL		
CONTRIBUTIONS HAVE BEEN, OR WILL BE, ACCEPTED. EARNINGS ON EXISTING		
BALANCES ARE DISTRIBUTED ANNUALLY TO PARTICIPANTS AND INCLUDED ON W-2S		
	Schedule J (Form 990) 2019	 ₽

Schedule J (Form 990) 2019 OCLC, INC.	31-0734115	Page 3
Part III Supplemental Information Part III Part III Part III Part III Part III Part III Also complete this part for any additional information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information	s part for any additional information	
AND 1099S IN THE YEAR OF DISTRIBUTION, UNDER THE PLAN PARTICIPANTS		
RECEIVE THE RIGHT TO PURCHASE MUTUAL FUND SHARES FOR A FIXED PRICE.		
SUCH RIGHT CAN, GENERALLY, BE EXERCISED AT ANY TIME WITHIN A 20-YEAR		
PERIOD FOLLOWING THE DATE OF GRANT. HOWEVER, IN THE CASE OF A		
PARTICIPANT'S DEATH, RIGHTS HELD BY SUCH PARTICIPANT MUST BE EXERCISED		
WITHIN SIX MONTHS FROM THE DATE OF DEATH, AND IN THE CASE OF		
TERMINATION OF EMPLOYMENT (EXCEPT FOR RETIREMENT) RIGHTS HELD BY THE		
TERMINATED PARTICIPANT MUST BE EXERCISED WITHIN SIX MONTHS OF THE DATE		
OF TERMINATION (UNLESS EXTENDED BY THE PRESIDENT), COMPENSATION INCOME		
ATTRIBUTABLE TO RIGHTS GRANTED UNDER THE PLAN, FOR TAX REPORTING		
PURPOSES, IS NEITHER DETERMINABLE AT THE TIME OF GRANT THEREOF, NOR AT		
OCLC'S FISCAL YEAR END, IF STILL OUTSTANDING. MORE SPECIFICALLY, IT IS		
ONLY UPON EXERCISE OF ONE OF THESE RIGHTS THAT A PARTICIPANT MUST		
RECOGNIZE COMPENSATION INCOME, FOR TAX REPORTING PURPOSES.		
PARTICIPANTS IN THE PLAN REPORTED ON THIS RETURN:		
ROBERT JORDAN, FORMER PRESIDENT AND CEO		
RICK SCHWIETERMAN. FORMER EXECUTIVE VP AND CFO		
	Schodulo 1/Eorm	000

Schedule J (Form 990) 2019

Department of the Treasury Internal Revenue Service SCHEDULE K (Form 990)

Name of the organization

 Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
 It to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information. Supplemental Information on Tax-Exempt Bonds

Inspection

Employer Identification number

▶ Attach to Form 990.

2019 Open to Public OMB No 1545-0047

Schedule K (Form 990) 2019 Ŷ (ı) Pooled 002,716 30,000,000 30,000,000 financing × × × × × ы 2019 Yes ŝ ~ (g) Defeased (h) On behalf ŝ ۵ × of issuer × × Yes 31-0734115 Yes × å × × × × 30,000,000. 30,000,000 8,998,410. Yes × × ŝ 2018 ပ (f) Description of purpose Yes × × 30,000,000. 30,000,000 ٨I 16,681,606, 7 ΙN 30,000,000.SEE PART VI × × SEE PART SEE PART SEE PART ž 2016 8 30,000,000 30,000,000 30,000,000 Yes × × (e) Issue price .000 30,000,000 24,033,809. × × ŝ 2014 30,000 ⋖ (d) Date issued Yes 10/28/14 04/14/16 03/28/18 11/26/20 × × (c) CUSIP# TONEAVAIL NONEAVAIL NONEAVAIL NONEAVAIL Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Does the organization maintain adequate books and records to support the Were the bonds issued as part of a refunding issue of taxable bonds (or, if (b) Issuer EIN 57-1239430 37-1239430 57-1239430 57-1239430 issued prior to 2018, an advance refunding issue)? if issued prior to 2018, a current refunding issue)? Has the final allocation of proceeds been made? Working capital expenditures from proceeds COLUMBUS-FRANKLIN COUNTY FINANCE COLUMBUS-FRANKLIN COUNTY FINANCE FINANCE COLUMBUS-FRANKLIN COUNTY FINANCE Capital expenditures from proceeds OCIC, INC Credit enhancement from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds Proceeds in refunding escrows COLUMBUS-FRANKLIN COUNTY Issuance costs from proceeds Year of substantial completion final allocation of proceeds? (a) Issuer name Other unspent proceeds Amount of bonds retired Total proceeds of issue Other spent proceeds **Bond Issues** Part II Proceeds B AUTHORITY C AUTHORITY D AUTHORITY A AUTHORITY Part I 4 S 9 œ 6 က 9 4 5 9 4

Schedule K (Form 990) 2019 OCLC, INC.			31-0734115	34115				Page 2
Part III Private Business Use								
Of the the extensivation is an advantage of a section of the secti	A	Ç.	8	24	ر د د	<u>ر</u> د	٨٥	Q.
	69	×	55	×	3	×	3	×
2 Are there any lease arrangements that may result in private business use of								
bond-financed property?		×		×		×		×
3a Are there any management or service contracts that may result in private								
business use of bond-financed property?		×		×		×		×
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of								
bond-financed property?		×		×		×		×
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by								
entitles other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of							_	
unrelated trade or business activity carried on by your organization, another								
section 501(c)(3) organization, or a state or local government ▶		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?		×		×		×		×
8a Has there been a sale or disposition of any of the bond-financed property to a non-								
governmental person other than a 501(c)(3) organization since the bonds were issued?		×		×		×		×
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed								
of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections								
1 141-12 and 1 145-2?								
9 Has the organization established written procedures to ensure that all nonqualified								
bonds of the issue are remediated in accordance with the requirements under								
Regulations sections 1 141-12 and 1 145-27	×		×		×	,	×	
Part IV Arbitrage								
		A		8		S	۵	
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	Š	Yes	8	Yes	N _o	Yes	No
Penalty in Lieu of Arbitrage Rebate?		×		×		x		x
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		×		×		×		×
b Exception to rebate?	×		×		×		×	
c No rebate due?		Х		x		×		×
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
İ];		;		;
3 Is the bond issue a variable rate issue?		×		×		×		×
932122 10-18-19						Sch	Schedule K (Form 990) 2019	m 990) 2019

;

Page 3 ŝ × ž ۵ Yes Yes × × ŝ ŝ × × O Yes Yes × × ŝ ŝ × × 31-0734115 m œ Yes Yes × × Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions ŝ ŝ × Yes Yes × × d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? BOND B, COLUMN F - TO ACQUIRE REAL PROPERTY, EQUIPMENT, DATABASES, AND BOND C, COLUMN F - TO ACQUIRE REAL PROPERTY, EQUIPMENT, AND DATABASES BOND D, COLUMN F - TO ACQUIRE REAL PROPERTY, EQUIPMENT, AND DATABASES Has the organization established written procedures to monitor the requirements of federal tax requirements are timely identified and corrected through the voluntary Has the organization established written procedures to ensure that violations of closing agreement program if self-remediation isn't available under applicable 5a Were gross proceeds invested in a guaranteed investment contract (GIC)? Were any gross proceeds invested beyond an available temporary period? 4a Has the organization or the governmental issuer entered into a qualified BOND A, COLUMN F - TO ACQUIRE REAL PROPERTY AND EQUIPMENT Part V Procedures To Undertake Corrective Action OCIC, INC. hedge with respect to the bond issue? d Was the hedge superintegrated? e Was the hedge terminated? Part IV Arbitrage (continued) Schedule K (Form 990) 2019 **b** Name of provider **b** Name of provider c Term of hedge section 1487 regulations? c Term of GIC SCH K, PART I SOFTWARE

SCHEDULE L

Department of the Treasury

Transactions With Interested Persons

(Form 990 or 990-EZ) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a,

► Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Internal Revenue Service

28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No 1545-0047

Inspection

Name of the organization **Employer identification number** 31-0734115 OCLC INC Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only) Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (d) Corrected? (b) Relationship between disqualified (a) Name of disqualified person (c) Description of transaction person and organization No Yes 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (a) Name of (b) Relationship (i) Written (c) Purpose (d) Loan to or (e) Original (f) Balance due (g) In by board or from the agreement? with organization interested person of loan principal amount default? cómmittee? organization? To From No Yes Yes No Yes No LORCAN DEMPSEY OFFICER PART V 50,000 11,250 х 11,250 Total Grants or Assistance Benefiting Interested Persons. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (a) Name of interested person (c) Amount of (d) Type of (e) Purpose of (b) Relationship between assistance interested person and assistance assistance the organization

932131 10-21-19

Schedule L (Form 990 or 990-EZ) 2019

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz reven	ation's
				Yes	No
			ļ		
	 - 				
				 	
					
		_ - _			
Part V Supplemental Information.					
Provide additional information for res	ponses to questions on Schedule L (see ii	nstructions)	<u> </u>		
SCHEDULE L, PART II					
Benzeel I, I'mai II			•		
OCLC LOANED FUNDS TO THIS OFFICER TO	FACILITATE HIS RELOCATION TO				
OGIC'S UPADOHARMERS IN PURITY OFFS	מייים מגשל משלמו שמוחם א מחדמון	7			
OCLC'S HEADQUARTERS IN DUBLIN, OHIO D	URING A PRIOR FISCAL YEAR. THESE	<u> </u>			
FUNDS WERE USED TO FINANCE A NEW PRIN	CIPAL RESIDENCE, THE LOAN IS THE	3			
RESULT OF ARMS-LENGTH NEGOTIATION AND	PROVIDES FOR A BALLOON REPAYMEN	IT			-
AT THE END OF THE TERM. INTEREST IMPU	TED ON THIS LOAN AS DESCRIBED IN	ī			
			*		
SECTION 7872 OF THE INTERNAL REVENUE	CODE IS REPORTED IN PART VII AND)			
SCHEDULE J OF THIS RETURN.					
		·			
	 				
			<u></u>		
					-

Schedule L (Form 990 or 990-EZ) 2019

SCHEDULE 0

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047

Open to Public Inspection

(Form 990 or 990-EZ) Department of the Treasury

► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.

Internal Revenue Service Name of the organization Employer identification number 31-0734115 OCLC, INC. FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: PROMOTE THE EVOLUTION OF LIBRARY USE, OF LIBRARIES THEMSELVES AND OF LIBRARIANSHIP, AND TO PROVIDE PROCESSES AND PRODUCTS FOR THE BENEFIT OF LIBRARY USERS AND LIBRARIES. INCLUDING SUCH OBJECTIVES AS INCREASING AVAILABILITY OF LIBRARY RESOURCES TO INDIVIDUAL LIBRARY PATRONS AND REDUCING THE RATE-OF-RISE OF LIBRARY PER-UNIT COSTS, ALL FOR THE FUNDAMENTAL PUBLIC PURPOSE OF FURTHERING EASE OF ACCESS TO AND USE OF THE EVER-EXPANDING BODY OF WORLDWIDE SCIENTIFIC, LITERARY AND EDUCATIONAL KNOWLEDGE AND INFORMATION. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: INCREASING AVAILABILITY OF LIBRARY RESOURCES TO INDIVIDUAL LIBRARY PATRONS AND REDUCING THE RATE-OF-RISE OF LIBRARY PER-UNIT COSTS, ALL FOR THE FUNDAMENTAL PUBLIC PURPOSE OF FURTHERING EASE OF ACCESS TO AND USE OF THE EVER-EXPANDING BODY OF WORLDWIDE SCIENTIFIC, LITERARY AND EDUCATIONAL KNOWLEDGE AND INFORMATION. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: LIBRARIES, STAFF AND PARTNERS MAKE BREAKTHROUGHS POSSIBLE. OCLC NARRATIVE FOR FY20 IN 2019, OCLC MEMBERS WORKED TOGETHER IN NEW WAYS, MADE POSSIBLE BY THE UNIQUE STRENGTHS OF THE OCLC COOPERATIVE. FROM LARGE-SCALE, NATIONAL INFRASTRUCTURE SERVICES DOWN TO INDIVIDUAL, USER-LEVEL OPPORTUNITIES THE TRANSFORMATIVE POWER OF OCLC'S ENGAGED, ACTIVE MEMBERS AND STAFF IS TRULY INSPIRATIONAL.

Schedule O (Form 990 or 990-EZ) (2019)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2019) Name of the organization	Page 2 Employer identification number
OCLC, INC.	31-0734115
WORLDCAT	
TOGETHER, OCLC STAFF AND MEMBER LIBRARIES GREW WORLDCAT TO 453 MILLION	
RECORDS AND 2.8 BILLION HOLDINGS. OTHER PARTNERS HELPED GROW WORLDCAT,	
TOO, WITH 364 NEW CONTENT COLLECTIONS FROM 29 PROVIDERS. OCLC CONTINUED	
TO GROW THE WORLDCAT KNOWLEDGE BASE BY LOADING 1,583 NEW COLLECTIONS	
AND ADDING 10 NEW PROVIDERS. AND OCLC PARTNERED WITH EAST VIEW	
INFORMATION SERVICES, SPRINGER NATURE, AND KNOVEL TO AUTOMATE LIBRARY	
HOLDING FEEDS, REGISTERING LIBRARY COLLECTIONS IN WORLDCAT AND	
DELIVERING WORLDCAT MARC RECORDS VIA COLLECTION MANAGER.	
COLLABORATION AT NATIONAL LEVELS	
OCLC INCREASED THE NUMBER OF REGIONS BUILDING LIBRARY INFRASTRUCTURE ON	
OCLC'S SYNDEO, A FLEXIBLE SUITE OF SERVICES THAT SERVES NATIONAL AND	
REGIONAL GROUPS.	
THE BIBLIOTHEKSSERVICE-ZENTRUM BADEN-WRTTEMBERG (BS2) AND	
VERBUNDZENTRALE DES GBV (VZG) ANNOUNCED THE LAUNCH OF A NEW JOINT	
INITIATIVE, K10PLUS. THIS NEW COLLABORATION PROVIDES THE LARGEST	
CATALOG IN GERMANY FOR SCIENTIFIC LIBRARIES AND IS BEING DEVELOPED	
USING SYNDEO.	
OCLC PARTNERED WITH JISC TO LAUNCH THE FIRST TWO NATIONAL BIBLIOGRAPHIC	
KNOWLEDGEBASE (NBK) PILOT SERVICES, DISCOVERY AND CATALOGING. THE NBK	
SUPPORTS THE UK HIGHER-EDUCATION COMMUNITY AND CONNECTS TO THE GLOBAL	
LIBRARY NETWORK THROUGH WORLDCAT. BY THE END OF 2019, 104 LIBRARY	
COLLECTIONS WERE LOADED.	
OCLC IS EXPLORING A PARTNERSHIP WITH THE NATIONAL INSTITUTE FOR	
INFORMATICS (NII) IN JAPAN TO USE THE SYNDEO SUITE OF SERVICES TO	
EXPAND NII'S GLOBAL REACH WHILE FACILITATING LIBRARY COOPERATION IN ITS	
332212 09-05-19	Schedule O (Form 990 or 990-EZ) (2019)

Name of the organization	Employer identification number
OCLC, INC.	31-0734115
REGION.	_
OCLC PUBLISHED THE OCLC RESEARCH REPORT, MAPLE LEAVES: DISCOVERING	
CANADA THROUGH THE PUBLISHED RECORD. THE REPORT COMBINED INFORMATION	
FROM WORLDCAT AND WIKIDATA TO EXPLORE CANADA'S RICH CONTRIBUTION TO	
LITERATURE, MUSIC, FILMS, AND OTHER CREATIVE EXPRESSIONS.	
OCLC WISE	
OCLC WISE IS THE COMMUNITY ENGAGEMENT SYSTEM THAT'S CREATING NEW	
CONNECTIONS FOR PUBLIC LIBRARIES. ALREADY USED BY MORE THAN 75 PERCENT	
OF PUBLIC LIBRARIES IN THE NETHERLANDS, OCLC LAUNCHED WISE IN THE U.S.	
LAST YEAR. THIS YEAR, THE POOL OF EARLY ADOPTERS GREW, WITH THE SIGNING	
OF THE ORANGE COUNTY LIBRARY SYSTEM, KOKOMO-HOWARD COUNTY PUBLIC	
LIBRARY, CHESAPEAKE PUBLIC LIBRARY, GWINNETT COUNTY PUBLIC LIBRARY, AND	
GREENSBORO PUBLIC LIBRARY. ALLEN COUNTY PUBLIC LIBRARY, THE FIRST EARLY	
ADOPTER, WENT LIVE IN NOVEMBER 2019.	
OCLC EXPANDED WISE IN EUROPE. THE PUBLIC LIBRARY OF BREE IN BELGIUM	
WENT LIVE WITH WISE IN JANUARY. THIS WAS THE FIRST WISE LIBRARY LIVE	
OUTSIDE OF THE NETHERLANDS. A TOTAL OF 30 MORE LIBRARIES WITH	
CULTUURCONNECT IN FLANDERS, THE DUTCH-SPEAKING REGION OF BELGIUM,	<u>, , , , , , , , , , , , , , , , , , , </u>
FOLLOWED. THIS PROJECT INCLUDES THESE AS WELL AS ALL OF THE OTHER 315	
PUBLIC LIBRARIES IN FLANDERS, WITH LIBRARIES IMPLEMENTING THE SYSTEM IN	
PHASES THROUGH 2021.	
GERMAN DEVELOPMENT OF WISE IS UNDERWAY WITH INPUT FROM SEVERAL LEADING	
GERMAN PUBLIC LIBRARIES.	
RESOURCE SHARING	
OCLC MARKED THE 40TH ANNIVERSARY OF OCLC RESOURCE SHARING BY EXPANDING	
OUR GLOBAL NETWORK OF RESOURCE SHARING LIBRARIES AND ENHANCING THE	hadula 0 /Farm 200 av 200 F7) (2010)

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization OCLC, INC.	Employer identification number 31-0734115
SELECTED WMS, AND, MCGILL UNIVERSITY, UNIVERSITY OF WINNIPEG, ROBERT	
MORRIS UNIVERSITY, FAIRLEIGH DICKINSON UNIVERSITY, AND THE US CENSUS	
BUREAU WENT LIVE.	
* UN EUROPE AND THE MIDDLE EAST, NEW WMS MEMBERS INCLUDED THE UNITED	
ARAB EMIRATES UNIVERSITY, UTRECHT UNIVERSITY, AND THE LIBRARY OF AECID	
(AGENCIA ESPAOLA DE COOPERACIN PARA EL DESARROLLO). COMPLUTENSE	
UNIVERSITY OF MADRID AND THE KORE UNIVERSITY OF ENNA WENT LIVE.	
* ustralia, the mannix library signed an agreement to transition to	<u> </u>
WMS.	
OCLC COMPLETED THE LIBRARY AND ARCHIVES CANADA PROJECT, A WMS	·
IMPLEMENTATION THAT INCLUDED A 3.5 MILLION BIBLIOGRAPHIC RECORD DATA	
MIGRATION AND A FRENCH TRANSLATION OF THE ANALYTICS/REPORT DESIGNER	
INTERFACE. OCLC ALSO CREATED NEW STRUCTURES OF CANADIANA NAMES AND	
CANADIAN SUBJECT AUTHORITY FILES.	
	·
OCLC MEMBER CONNECTIONS	
IN 2019, OCLC GLOBAL COUNCIL SELECTED THE FOCUS AREA OF OPEN CONTENT	
AND SPONSORED A GLOBAL SURVEY ON THE SUBJECT. THE SURVEY WAS A HUGE	
SUCCESS WITH 705 RESPONSES FROM 82 COUNTRIES.	
OCLC GLOBAL COUNCIL DELEGATES ELECTED THERESA BYRD, DEAN OF THE	
UNIVERSITY LIBRARY, UNIVERSITY OF SAN DIEGO, TO THE OCLC BOARD OF	
TRUSTEES.	
MORE THAN 800 LIBRARIANS ACROSS 52 COUNTRIES ATTENDED ONE OF THREE OCLC	
REGIONAL COUNCIL CONFERENCES.	
IN THE NETHERLANDS, THE UK, AND GERMANY, OCLC HELD CONTACT DAY,	
CUSTOMER DAYS, LIBRARY LEADERS DAY, AND DAYS WITH CONSORTIUM PARTNERS,	
REACHING MORE THAN 700 LIBRARIANS.	
OCLC HOSTED THE THIRD ANNUAL OCLC RESOURCE SHARING CONFERENCE, WHERE	
932212 09-06-19 Sch	nedule O (Form 990 or 990-EZ) (2019)

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization OCLC, INC.	Employer identification number 31-0734115
MORE THAN 300 ATTENDEES-FROM 45 US STATES, AS WELL AS THE UK AND	
CANADA-MET TO LEARN AND SHARE CREATIVE WAYS TO USE OCLC RESOURCE	
SHARING SERVICES.	
SECURING THE COLLECTIVE COLLECTION	
OCLC'S GROUNDBREAKING WORK IN SHARED PRINT COLLECTIONS ACCELERATED.	
GREENGLASS, A WEB APPLICATION THAT ALLOWS SINGLE LIBRARIES TO VISUALIZE	
THEIR COLLECTIONS IN COLLECTIVE COLLECTIONS, GREW GLOBALLY, AS OCLC	
SIGNED 42 NEW OR EXTENDED CONTRACTS WITH INSTITUTIONS SUCH AS MINITEX,	
LIBRARIES AND ARCHIVES CANADA, AND THE MICHIGAN SHARED PRINT	
INITIATIVE.	
IN PARTNERSHIP WITH THE CENTER FOR RESEARCH LIBRARIES, OCLC IS	
DEVELOPING A REGISTRY IN WORLDCAT FOR LIBRARY RETENTION COMMITMENTS FOR	
PRINT SERIALS USING A \$1 MILLION GRANT FROM THE MELLON FOUNDATION,	
WHICH WAS AWARDED IN JUNE 2018. THIS EFFORT WILL CONTINUE THROUGH FY20.	
CONTINUED LEADERSHIP IN LINKED DATA	
WORKING WITH 16 INSTITUTIONS, OCLC COMPLETED A LINKED DATA WIKIBASE	
PROTOTYPE, BUILT TO VIEW, EDIT, AND CREATE LINKED DATA DESCRIPTIONS AND	
RELATIONSHIPS, AND TO RECONCILE DATA BETWEEN LEGACY BIBLIOGRAPHIC	
INFORMATION AND LINKED DATA ENTITIES. OCLC PUBLISHED ANALYSIS OF 2018	
INTERNATIONAL LINKED DATA SURVEY FOR IMPLEMENTERS TO SHARE INFORMATION	
ABOUT PROJECTS OR SERVICES THAT FORMAT METADATA AS LINKED DATA OR MAKE	
SUBSEQUENT USES OF IT.	
A CELEBRATION OF LITERATURE AND LIBRARIES	
THE LIBRARY 100: TOP NOVELS OF ALL TIME IS A LIST OF THE NOVELS MOST	
WIDELY AVAILABLE IN LIBRARIES TODAY. USING WORLDCAT, THE WORLD'S 932212 09-06-19	Schedule O (Form 990 or 990-EZ) (2019)

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Schedule O (Form 990 or 990-EZ) (2019)	
Name of the organization OCLC, INC.	Employer identification number 31-0734115
FORM 990, PART VI, SECTION A, LINE 7A.	
THE OCLC GLOBAL COUNCIL ELECTS SIX MEMBERS OF THE OCLC BOARD OF TRUSTEES.	
FORM 990, PART VI, SECTION B, LINE 11B:	
THE 990 RETURN AND RELATED SCHEDULES AND FILINGS (THE "RETURN") ARE	
PREPARED AND REVIEWED INTERNALLY BY OCLC FINANCE STAFF IN CONSULTATION WITH	
APPROPRIATE OCLC PERSONNEL. THE RETURN IS THEN REVIEWED BY BDO USA, LLP.	
UPON BDO'S REVIEW, THE RETURN IS REVIEWED BY APPROPRIATE OCLC MANAGEMENT	
PERSONNEL, SUCH AS THE CHIEF FINANCIAL OFFICER, CONTROLLER AND/OR GENERAL	
COUNSEL. UPON MANAGEMENT'S APPROVAL, THE RETURN IS PROVIDED ELECTRONICALLY	
FOR REVIEW TO ONE OR MORE MEMBERS OF THE BOARD OF TRUSTEES.	
FORM 990, PART VI, SECTION B, LINE 12C:	
ALL EMPLOYEES ARE REQUIRED TO CERTIFY THEIR KNOWLEDGE OF, AND COMPLIANCE	
WITH, THE POLICY ON AN ANNUAL BASIS BY SIGNING A STATEMENT. IF IT IS	
UNCLEAR IF A CONFLICT EXISTS, THE EMPLOYEE MUST CONTACT THE GENERAL COUNSEL	
FOR CLARIFICATION.	
IN ADDITION TO THE GENERAL POLICY FOR ALL EMPLOYEES, MEMBERS OF THE OCLC	
BOARD OF TRUSTEES AND THE STRATEGIC LEADERSHIP TEAM ARE REQUIRED TO ANSWER	
MORE DETAILED QUESTIONS IN WRITING ON AN ANNUAL BASIS AND ALL RESPONSES ARE	
REVIEWED BY THE AUDIT COMMITTEE OF THE OCLC BOARD OF TRUSTEES.	
FORM 990, PART VI, SECTION B, LINE 15:	
FOR ALL EXECUTIVES, THE PERSONNEL AND COMPENSATION COMMITTEE OF THE OCLC	
BOARD OF TRUSTEES REVIEWS THE PROPOSED COMPENSATION AND AN ANALYSIS OF	
COMPENSATION IN THE MARKETPLACE FOR COMPARABLE POSITIONS PREPARED BY AN	
OUTSIDE CONSULTANT. ONCE APPROVED BY THE COMMITTEE, THE ENTIRE BOARD OF	O.H. 14 O.F
932212 09-06-19	Schedule O (Form 990 or 990-EZ) (2019)

Schedule O (Form 990 or 990-EZ) (2019)		Page 2
Name of the organization OCLC, INC.		Employer identification number 31-0734115
TRUSTEES MEETS IN EXECUTIVE SESSION TO REVIEW A	IND VOTE ON THE COMPENSATION	
PACKAGES. THE COMMITTEE AND THE FULL BOARD CONS	IST ONLY OF INDIVIDUALS WHO	
DO NOT HAVE A CONFLICT OF INTEREST WITH RESPECT	TO SETTING THE COMPENSATION	
FOR THE EXECUTIVES. WRITTEN MINUTES OF ALL BOAR	D COMMITTEES AND BOARD OF	
TRUSTEE MEETINGS ARE PREPARED.		
MORE INFORMATION ABOUT OCLC EXECUTIVE COMPENSAT	TION CAN BE FOUND ON THE OCLC	
WEBSITE AT THE FOLLOWING LINK		
		····
HTTP.//WWW.OCLC.ORG/EN-US/ABOUT/FINANCE/EXECUTI	VE_COMPENSATION.HTML	
FORM 990, PART VI, SECTION C, LINE 19:		
THE ARTICLES OF INCORPORATION AND THE ANNUAL AU	DITED FINANCIAL STATEMENTS	
ARE AVAILABLE ON THE OCLC WEBSITE.	<u>.</u>	
	<u></u>	
HTTP.//WWW.OCLC.ORG/EN-US/MEMBERSHIP/COUNCILS.H	TML	
HTTP://WWW.OCLC.ORG/EN-US/ABOUT/FINANCE.HTML		
IN ADDITION, THE ANNUAL REPORT (INCLUDING CONDE	NSED FINANCIAL STATEMENTS)	
IS PROVIDED TO THE DIRECTORS OF ALL MEMBERS, TH	E ANNUAL REPORT IS ALSO	
AVAILABLE ON THE OCLC WEBSITE		-
HTTP://WWW.OCLC.ORG/EN-US/ABOUT/FINANCE.HTML		

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSET		·
FOREIGN CURRENCY TRANSLATION	-8,088,531.	-
UNREALIZED POST RETIREMENT 932212 09-06-19	-1,159,414.	Schedule O (Form 990 or 990-EZ) (2019)
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SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

Open to Public Inspection 2019

OMB No 1545-0047

Employer identification number 31-0734115

■ Go to www.irs.gov/Form990 for instructions and the latest information.

CLC ONLINE COMPUTER 18,519,262. LIBRARY CENTER, INC Direct controlling entity 5,867,400. DCLC EMEA BV 5,342,859.pcic EMEA BV 19,665,785.pcrc EMEA BV End-of-year assets <u>e</u> 16,023,578. 12,000,021. 545,573. Total income € Legal domicile (state or Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 foreign country) NETHERLANDS NETHERLANDS SERMANY INFORMATION SERVICES INFORMATION SERVICES Primary activity HOLDING COMPANY Name, address, and EIN (if applicable) OCIC, INC. of disregarded entity OCLC (UK) LIMITED - 98-1067510 D-82041 OBERHACHING, GERMANY OCLC EMEA BV - 98-1065403 SCHIPHOLWEG 99 2316 XA SCHIPHOLWEG 99 2316 XA OCLC GMBH - 98-1063976 OCLC BV - 98-1065524 LEIDEN, NETHERLANDS LEIDEN, NETHERLANDS GRUNWALDER WEG 28G 8 ST MARYS GATE Parti

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year PartII

UNITED KINGDOM

INFORMATION SERVICES

UNITED KINGDOM

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3,589,589.

(a)	(q)	(၁)	(p)	(e)	(J)	(6) š	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity		section 512(b) 13)	Z(0) 13)
of related organization		foreign country)	section	status (if section	entity	entity	0
				501(c)(3))		Yes	٩
"							
						-	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	s for Form 990.				Schedule R (Form 990) 2019	(Form 99() 2019

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932161 09-10-19 LHA

31-0734115

Schedule R (Form 990) OCLC, INC.

| Part | Continuation of Identification of Disregarded Entities

Name, address, and EIN of disregarded entity HKA GRONINGERWEG 13-C 9765 TA PATERSWOLDE, NETHERLANDS IFNET S.R.L. VAILE DEI MILLE 50131 FIRENZE, ITALY	Primary activity INFORMATION SERVICES INFORMATION SERVICES	Legal domicile (state or foreign country) NETHERLANDS ITALY	(d) Total income	End-of-year assets	ear assets Direct controlling entity DCLC EMEA BV 769, 247, DCLC EMEA BV
					

Page 2

31-0734115

OCTC, INC. Schedule R (Form 990) 2019

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year Part III

(k)	partner?									
(S)	managing partner?									
(i) (i) Geo	amount in box man and of the second s		;							
(F)	Unsproportionate altocations? Yes No									
(g)	end-of-year assets									
(f)	income									
(e)	(related, unrelated, excluded from tax under sections 512-514)									
(d)	entity						-			
(c) Legal	domicile (state or foreign country)									
(b)	לוווומוץ מכוועונץ									
(a) Name address and FIN	of related organization									

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year Part IV

(a)	(q)	(၁)	(d)	(e)	((6)	(H)	Ξ	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp,	Shar	of /ear	Percentage ownership	Section 512(b)(13) controlled entity?	- (13) - (13)
		country)		or trust)		assers		Yes	Š
OCLC AG									
ST JAKOBS-STRASSE 96									
CH-4052 BASEL, SWITZERLAND	INFORMATION SERVICES	SWITZERLADCLC GMBH	OCIC GMBH	c corp	491,798.	333,837.	100.00\$	×	
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	•								
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	*						_		
932162 09-10-19		64				Sche	Schedule R (Form 990) 2019	; (066 ເ	2019

31-0734115 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36 a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule c Gift, grant, or capital contribution from related organization(s) Gift, grant, or capital contribution to related organization(s) d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s) Sale of assets to related organization(s) Schedule R (Form 990) 2019 OCLC, INC. Dividends from related organization(s)

Page 3

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Yes

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m Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Sharing of paid employees with related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

Lease of facilities, equipment, or other assets to related organization(s)

Purchase of assets from related organization(s) Exchange of assets with related organization(s)

q Reimbursement paid by related organization(s) for expenses Reimbursement paid to related organization(s) for expenses

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Other transfer of cash or property from related organization(s) r Other transfer of cash or property to related organization(s)

Schedule R (Form 990) 2019 Method of determining amount involved 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds <184,192. PER CONTRACT (c) Amount involved (b)
Transaction type (a·s) 65 ᆸ (a)
Name of related organization (1) OCLC AG 932163 09-10-19 থ ପ୍ର **3** গ্র (9)

31-0734115

Schedule R (Form 990) 2019 OCLC, INC.

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(h) (i) Dispropor Lonate amount in box 20 allocations2 of Schedule K-1 Yes No (Form 1065)	Cod amount of Sch (Forr		
Share of total income			
Are all Share of 501(s)(3) total (ves No noome ves No noo	(c) (c) (country)		
(f) (varial subset) (varial su	(b) Primary activity		
(e) (e) (figure 1) (figure 2) (figure 3) (figure 3) (figure 3) (figure 3) (figure 3) (figure 4) (fi	Name, address, and EIN of entity		

Schedule R (Form 990) 2019

Schedule R	(Form 990) 2019	OCLC, INC.	31-0734115	Page 5
Part VII	(Form 990) 2019 Supplemental Info	rmation		
L	Provide additional inform	nation for responses to questions on Schedule R See instructions		
	Provide additional inform	lation for responses to questions on schedule in See instructions		
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